Publish Reduction Act of 1985 no persons are required to respond to a collection of the Collection Act of 1985 no persons are required to respond to a collection of removator the reduction Act of 1985 no persons are required to respond to a collection of removator unrefer developed to a collection of remov

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2009				Complete if Known					
				Application Number		10/586,131	i,131 Conf. No.: 383		3838
				Filing Date July		July 17, 20	ly 17, 2006		
				First Named Inventor Masa		Masao SA	SAITO		
				Examiner Name C.		C. HICKS			
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 2629		2629			
TOTAL AMOUNT OF PAYMENT (\$) 810.00				Attorney Docket No. 0033-108			5PUS1		
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
Deposit Account Deposit Account Number: 02-2448 Deposit Account Name:									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s)									
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card									
information and authorization on PTO-2038.									
FEE CALCULATION									
BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES									
	CH FEES Small Entity	EES EXAMINA			TION FEES				
Application Type	Fee (\$)	Small Entity Fee (\$) Fe	ee (\$)	Fee (\$)	Fee	(S) Fee		Fees Pale	d (\$)
Utility	330	165 5	40	270	22	0 11	0		
Design	220	110 1	00	50	14	0 7	0		
Plant	220	110 3	30	165	17	0 8	5		
Reissue	330	165 5	40	270	65	0 32	5		
Provisional	220	110	0	0		0	0		
2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$)									
Each claim over 20 (including Reissues) 52 26									
Each independent claim over 3 (including Reissues)							220	110	
Multiple dependent claims							390	195 pendent_Clain	
Total Claims							ee (\$)	Fee Paid	
HP = highest number of total	claims paid f	or, if greater than 20.				-			111
Indep. Claims 2 - 3 or HP =	Extra Clai 0	ms Fee (\$) x =		Paid (\$) .00					_
HP = highest number of independent claims paid for, if greater than 3.									
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer									
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50									
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
4. OTHER FEE(S) Fees Paid (S)									
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) 810.00									
SUBMITTED BY 10 M									
ignature / / (vec tr 40, 417) Registration No. 29271 (Attorney/Agent)							Telephone 703-205-8000		
Name (Print/Type) Charles Gorenstein							Date Au	gust 27, 2010	

This collection of information is required by 37 CFF 1-136. The information is required to obtain or retire in basenit by the patic valida is to the fund by the collection of processis an application. Confidentially is your many by 31 U.S. C. 125 and 30 CFR 1-15. The collection is estimated to that 30 circulated to complete, and a processing of the collection is submitted to that 30 circulated to complete in the collection of the collection is submitted to that 30 circulated to complete in the collection of the USF1O. Then will vary depending upon the individual case. Any comments on the amount of time you require to complete the form and/or supposeds for the reducing the burden, and/or be sent to the Circulated case. Any comments and Trademark Office. U.S. Department of Commence, P.O. Box 1450, Mexandris, VA 22313-1450. D NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissionator for Patents, P.O. Box 1450, Mexandris, VA 22313-1450.